# FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

OMB Number: Expires: April 30,2008 Estimated average burden hours per response.....16.00

# PROCESSED MAY 1 5 2008 THOMSON REUTERS

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY											
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DATE REC	EIVED										
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B-11 (4.3)											

A. BASIC IDENTIFICATION DATA  A. BAS	Mail Processing Saction  MAY (1 / 2001)  Washington, DC  101  lephone Number (including Area Code) 2,701-8140
A. BASIC IDENTIFICATION DATA  I. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  RILEY JAMES DEVELOPMENT CORPORATION  Address of Executive Offices (Number and Street, City, State, Zip Code)  15851 Dallas Parkway, Suite 105, Addison TX  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  If different from Executive Offices)	MAY Q / Zuun Wəshington, DC: 101
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if different from Executive Offices)	
	elephone Number (Including Area Code)
Brief Description of Business	
Oil and/or gas projects - exploration & operations.	- I ZEZEM BENEL KEM BOWLENKE KOM ENEM GERO BOW
f f.D	
Type of Business Organization  Type corporation  Imited partnership, already formed  other (please symbol)  business trust  limited partnership, to be formed	pecify): 08049470
Month Year  Actual or Estimated Date of Incorporation or Organization: UP UT6 X Actual Estimated urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	Ō
GENERAL INSTRUCTIONS	
Pederal: The Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Sectio (7d(6).	on 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A noting Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed thotocopies of the manually signed copy or bear typed or printed signatures.	d. Any copies not manually signed must be
information Required: A new filing must contain all information requested. Amendments need only report the nathereto, the information requested in Part C, and any material changes from the information previously supplied in Part C to be filed with the SEC.	
Iding Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of states and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities re to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the execompany this form. This notice shall be filed in the appropriate states in accordance with state law. The April notice and must be completed.	es Administrator in each state where sales emption, a fee in the proper amount shall

filing of a federal notice.

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. Enter the information r	accurated for the f	<del></del>	IDENTI	FICATIONDALA				
	•	•	a					•
·		ssuer has been organize		•				
Each beneficial ow	ener having the por	wer to vote or dispose, o	r direct th	ie vote or dispositior	101, 10	% or more o	of a cla	ss of equity securities of the iss
<ul> <li>Each executive of</li> </ul>	ficer and director	of corporate issuers and	l of corpo	orate general and ma	maging	partners of	i partn	ership issuers; and
<ul> <li>Each general and i</li> </ul>	managing partner	of partnership issuers.						
heck Box(es) that Apply:	Promoter	Beneficial Own	er 💢	Executive Officer	X	Director		General and/or Managing Partner
all Name (Last name first,	if individual)					<del></del>		
RELAND, JOSEPH								
asiness or Residence Addre	ess (Number and	I Street, City, State, Zip	Code)					
5851 <u>Dallas I</u>	?arkway,	Suite 105,	Add	<u>ison, TX</u>	<u>7500</u>	)1		<u>.</u>
heck Box(es) that Apply:	Promoter	Beneficial Own	сг 🔀	Executive Officer		Director		General and/or Managing Partner
ıll Name (Last name first, i	if individual)			·	<u> </u>			
JONES, RO		,						
usiness or Residence Addre		• •						
15851 Da	llas Park	way, Suite	105	, Addison	, T)	7500	)1	
heck Box(es) that Apply:	Promoter	Beneficial Own	er 📋	Executive Officer		Director	X	General and/or Managing Partner
ıll Name (Last name first, i	if individual)							
RILEY JAN	MES DEVEI	COPMENT COR	PORA:	TION				
isiness or Residence Addre	<del></del>							
		way, Suite		. Addison	ту	7500	1	
neck Box(es) that Apply:	Promoter	Beneficial Own		Executive Officer		Director		General and/or Managing Partner
ill Name (Last name first, i	f individual)			<del></del>				
isiness or Residence Addre	ss (Number and	Street, City, State, Zip	Code)			<del></del>	-	
neck Box(es) that Apply:	Promoter	Beneficial Own	er 🗀	Executive Officer	$\overline{}$	Director	[]	General and/or
					لبا		Ш	Managing Partner
Il Name (Last name first, i	f individual)	<del></del>	· ····		<del></del>	<u>.                                    </u>		
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siness or Residence Addre	ss (Number and	Street, City, State, Zip	Code)					
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eck Box(es) that Apply:	Promoter	Beneficial Owne	r [_]	Executive Officer	L	Director	IJ	General and/or Managing Partner
ll Name (Last name first, it	l'individual)				· · · · · · · · · · · · · · · · · · ·			
ciners or Busides - Add	no / Namber and	Straat City Store 7'-	Code					
siness or Residence Addres	is (indiadel and	Succe, City, State, Zip	Code)					
eck Box(es) that Apply:	Promoter	Beneficial Owne	r 🗌	Executive Officer		Director		General and/or Managing Partner
Il Name (Last name first, if	Cinducidual			<u>,</u>				
r same (trast name first, 11	maryradarj							
siness or Residence Addres	is (Number and	Street, City, State, Zin	Code)	<u></u>		· · ·		
		,	•					
	(Use blan	nk sheet, or copy and us	se additic	onal copies of this sh	icet, as	necessary)		
		• •				2.5		

			-				UI OFFER					
1. Has th	e issuer sol	d or does t	the issuer	intend to s	elt to non-	accredited	investors i	n this offe	rino"		Yes • 🕱	No 571
7. /114.5 ***		a. W Givery					2, if filing				. <b>'V</b>	
2. What i	s the minin	num investi					-				. \$	23,750
						-					Yes	No
											4.50	
commi If a per or state	ssion or sin son to be lists, list the n	nilar remund sted is an as ame of the b	eration for sociated p broker or d	solicitation erson or ag lealer. If m	n of purcha: ent of a bro ore than fiv	sers in cons ker or deal re (5) perso	nection with ler registere	sales of so d with the ted are ass	curities in SEC and/o	directly, an the offering r with a stat sons of suc	ç.	
Full Name	(Last name	first, if ind	lividual)									
Name of As	51.Dal sociated B e Star	las Paroker or De	arkway <sup>aler</sup> ritie	y, Sui s, Inc	te 10	, Add	lison,	TX 75	5001			
States in W							-					II ()
(Check	"All State:	s or check	individua	i States)				••••••			∐ A	II States
			AR KS (NI) (NI)			ME NY VI		E SE				
Full Name (	Last name	first, if ind	ividual)							• •		
Business of	Residence	Address ()	Number an	d Street (	ity State	Zin Code)	··	<del></del>	<u></u>			
Duamesa o	Residence	riddicss (.	vamoer an	io meet, e	ity, State,	zip Couc)						
Name of As	sociated Br	oker or De	aler ·			· · · · · · · · · · · · · · · · · · ·						
States in W	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers					<del></del>	<del></del>
(Check	"All States	" or check	individual	States)							□ Al	I States
AL IL MT RI	AK IN NE SC	AZ JA NV SD	AR KS NII TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name (	Last name	first, if indi	ividual)								<del>-</del>	
Business or	Residence	Address (?	Number an	d Street, C	ity, State,	Zip Code)						- <del></del>
N			.1						·			
Name of As	sociated Br	oker or Dea	aier									
States in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	" or check	individual	States)	***************	***************************************	****************	***************************************		***************************************	All	l States
AL TL MT	AK IN NE SC	AZ IA NV SD)	AR KS NII IN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	MI MI OII WV	GA MN OK WI	MS OR WY	MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Type of Security Offering Price Sold Deht \_\_\_\_\_\_\_\_ \$\_\_\_\_\_\_ \$\_\_\_\_\_ Common Preferred Total \_\_\_\_\_\_\_ 6,935,00Q Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors..... Non-accredited Investors ..... Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 ..... Regulation A .... Rule 504 ..... Total ..... Furnish a statement of all expenses in connection with the issuance and distribution of the

securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees **S**\_\_\_\_\_ Printing and Engraving Costs.... □ **\$**\_\_\_\_\_ Legal Fees Accounting Fees Engineering Fees X \$693,500 Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) Organization Expenses § 62<u>4, 150</u> Total ..... **X** \$1,317,650

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Quest and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted proceeds to the issuer."	gross	<sub>\$</sub> 5,617,350
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be use each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjusted a proceeds to the issuer set forth in response to Part C — Question 4.b above.	and and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Sularies and fees		_
	Purchase of real estate Leasehold Acquisition Costs	S	X \$ 555,000
	Purchase, rental or leasing and installation of machinery and equipment	<b>□</b> ¢	m ¢
	Construction or leasing of plant buildings and facilities	<del></del>	<del></del>
	- · · · · · · · · · · · · · · · · · · ·	<u> </u> 3	_ [] 3
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	S	
	Repayment of indebtedness		<del></del> -
	, ,		<del></del>
	Working capital		<b>滋</b> \$ <u>5,062,3</u> 50
	Column Totals	\$	X \$5,617,350
	Total Payments Listed (column totals added)	<b>\_</b> \$	
	D. FEDERAL SIGNATURE	,	
igi	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this noture constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Con information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	nmission, upon writte	
SSI	ter (Print or Type) Signature	Date /	
	Riley James Development Corporation	1/2	5/08
lai	ne of Signer (Print or Type)  Title of Signer (Print or Type)		-/
_	Joseph H. Ireland President		

- ATTENTION ----

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE
t,	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification  Yes Provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	ter has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned thorized person.
	Print or Type)  Signature  Signature  4-25-88
Name (f	Print or Type) Title (Print or Type)

President

### Instruction;

Joseph H. Ireland

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PENDIX			·		
	Intend to non-a investor	2 d to sell accredited es in State 1-ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL	X		\$6,935,000						X	
AK										
AZ	X		6,935,000						Х	
AR	X		100,000						х	
CA	Х		6,935,000				_		x	
со	х		6,935,000						_x_	
СТ	x		6,935,000						X	
DE	Х		6,935,000						х	
DC		<u> </u>								
FL	X		6,935,000						Х	
GA	X	 	6,935,000						X	
HI	<u> </u>		6,935,000				-·		x	
ID	X		6,935,000						X	
IL	x		6,935,000						X	
IN	х	· <del></del>	6,935,000						_x_	
IA	x		<del>-6,935,000</del>						<u>x</u>	
KS	X		6,935,000						_x_	
KY	x		6,935,000						<u>x</u>	
LA	X		6,935,000						<u>x</u>	
ME										
MD	Х		6,935,000						X	
MA	_х_		6,935,000							
MI	х		6,935,000						<b>X</b>	
MN	Х		6,935,000		<del></del>				x	
MS	X		6,935,000						X	

				APP	ENDIX					
	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Partnershi Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No No	
мо	X		6,935,000						X	
MT	X		6,935,000						Х	
NE	X		6,935,000						Х	
NV	Х		6,935,000						х	
NH	х	<del></del>	6,935,000						Х	
NJ			6,935,000						X	
NM	X X		6,935,000						х	
NY	X	:	6,935,000						Х	
NC	X		6,935,000						Х	
ND	Х		6,935,000						Х	
ОН	Х		. 6,935,000						x	
ОК	X		6,935,000						X	
OR	х		6,935,000						х	
PA	Х	1	6,935,000						X	
RI	х	,	6,935,000						Х	
SC	X		_6,935,000	-					x	
SD	X		6,935,000						X	
TN	_ <b>X</b> _		6,935,000						x	
TX	X		_6,935,000						_ X	
UT	X	<b></b>	6,935,000						_ X	
VT	<del></del>	·								
VA	Х,		6,935,000						x	
WA	Х		6,935,000						x	
WV				-						
WI							M			
WY	X		6,935,000	8	of 9	L	-! AF		X	